

PART B - FEE(S) TRANSMITTAL

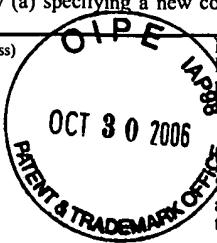
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28465 7590 07/28/2006

PATENT GROUP
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<i>Kathryn Walczak</i>	
(Depositor's name)	(Signature)
<i>Kathryn Walczak</i>	
(Date)	October 25, 2006

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/601,458	06/23/2003	Claus Emmer	PS954CIP	9736

TITLE OF INVENTION: CRYOGENIC FLUID DELIVERY SYSTEM

10/31/2006 SSESHE2 00000050 10601458

01 FC:1501 1400.00 OP
02 FC:1504 300.00 OP
03 FC:8001 15.00 OP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	10/30/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
DWIVEDI, VIKANSHA S	3746	417-379000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 DLA Piper US LLP

2 R. Blake Johnston

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Chart Industries, Inc.

The Woodlands, Texss

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
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A check is enclosed.
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 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 41,097 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature R. Blake Johnston

Date 10 - 25 - 2006

Typed or printed name R. Blake Johnston

Registration No. 41,097

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